



Swain County Inspections Department

101 Mitchell Street Bryson City, NC 28713

Phone: 828-488-9134 Fax: 828-488-9601

MISCELLANEOUS PERMIT APPLICATION CHECKLIST

NAME ON PERMIT _____ PHONE # _____

TAX IDENTIFICATION NUMBER _____

MAILING ADDRESS _____

911 ADDRESS (If different from above) _____

DECKS

ESTIMATED COST _____ DIMENSION _____

HEIGHT ABOVE GROUND _____ POST SIZE _____

JOIST SIZE _____ JOIST SPAN _____

GIRDER SIZE _____ GIRDER SPAN _____

CONTRACTOR NAME _____ LICENSE # _____

ELECTRICAL

SCOPE OF WORK _____ ESTIMATED COST _____

CONTRACTOR NAME _____ LICENSE # _____

DUKE WORK ORDER # _____

PLUMBING

SCOPE OF WORK _____ ESTIMATED COST _____

CONTRACTOR NAME _____ LICENSE # _____

MECHANICAL

SCOPE OF WORK _____ ESTIMATED COST _____

CONTRACTOR NAME _____ LICENSE # _____

SIGNATURE OF APPLICANT _____ DATE _____